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MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET							Application Number		Filing Date				
Substitute for Form PTO-1360 (For use with Form PTO/SB/06)							101539,090						
							Applicant(s)						
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		* May be used for additional claims or amendments						
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
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Total Indep	4		4				Total Indep						
Total Depend	10	←	10	←		←	Total Depend	←	←	←	←	←	←
Total Claims	14		14				Total Claims						

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Claim 7 was amended to eliminate multiples
claims 10 - 14 were added